



S O M E
USEFUL HINTS
A N D
FRIENDLY ADMONITIONS
T O
YOUNG SURGEONS
O N T H E
PRACTICE of MIDWIFERY.



[Price ONE SHILLING.]

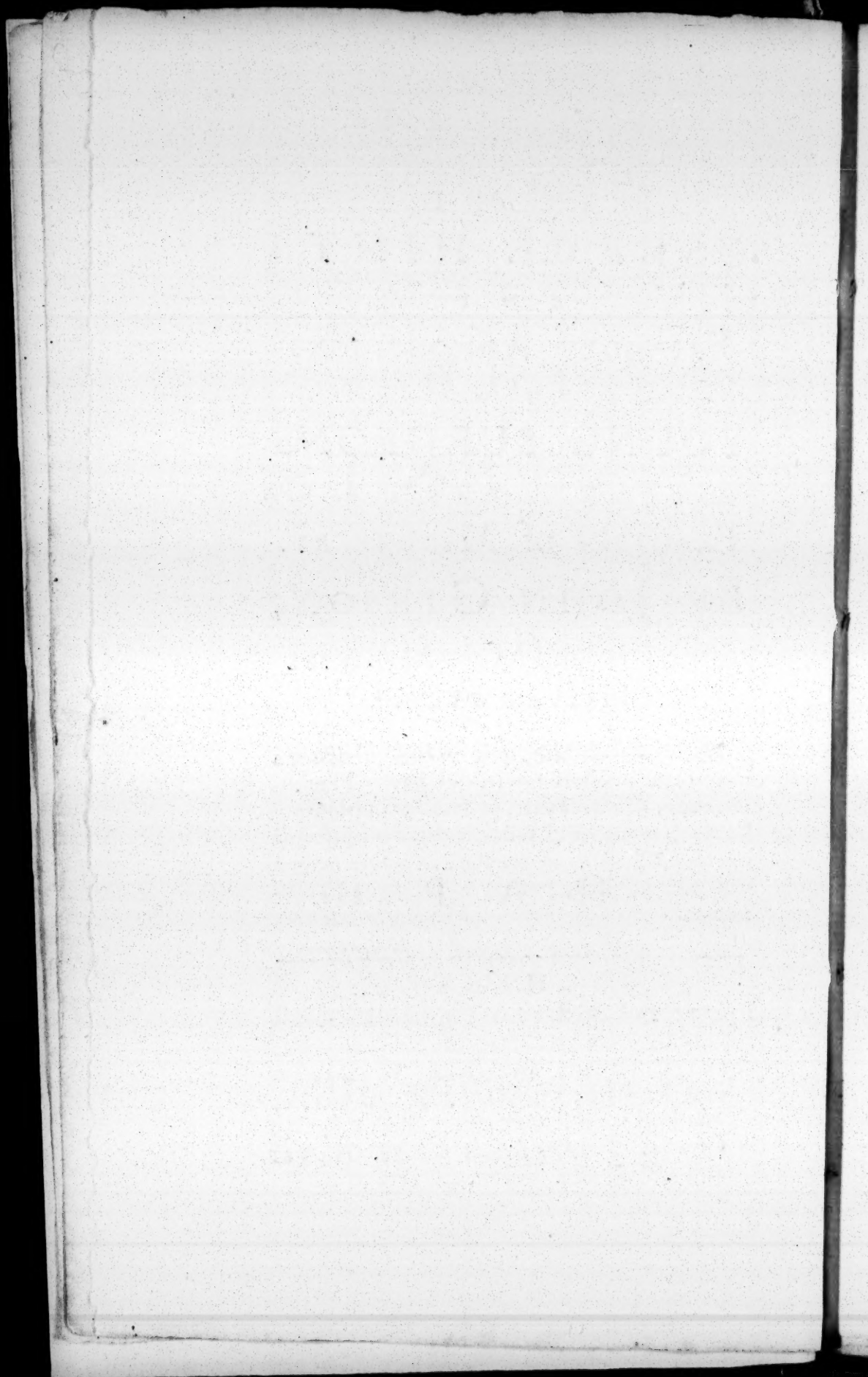


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PRACTICE of MIDWIFERY.
By JOHN GIBSON,
SURGEON and MAN-MIDWIFE
In HARWICH.

Nullus-----dubito, quin is-----qui operam
modo ritè præstare novit, qui has----Præmo-
nitiones---ita didicerit, ut semper in promptu
habeat, merito sibi felicem Exitum suscepti
operis polliceatur et præstet, non sine magnâ
utilitate publicâ, gratoque sui animi Testi-
monio. MANNINGHAM.

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((i))

Some USEFUL HINTS

A N D

Friendly Admonitions, &c.

INTRODUCTION.

ON account of the many
great improvements
which have been made and
published from time to time,

A in

in the present century, in the art of midwifery, by men of the greatest learning and eminence in the profession, there seems to be but little room for advancing any thing more on that subject. This consideration, together with the great dislike and fear I have of appearing in print in this criticising age, (being diffident of my own abilities, and having but little leisure to write) would have quite deterred me from
an

an attempt of this kind, did I not hear of mischief being too often done. And indeed daily and woful experience teaches us, that we are still too deficient in this, as well as in all the other branches of physick and surgery. I have therefore, from the tender regard I have always had for the fair sex, and the honour and reputation of our profession, ventured to offer you these few hints for your

consideration, which, I flatter myself, if duly attended to, will prove of use to you, young gentlemen, for whom they are particularly intended. If the older practitioners, to whom I do not presume to give any advice, as well knowing they can receive no improvement from it, will only afford them a favourable reception, it is, perhaps, more than I have a right to expect.

Should

Should it be found hereafter, that I have by this means, been instrumental in saving one life, or preventing any injury to be done to either mother or child, I shall be happy, and think myself well rewarded for my trouble. For I look upon it to be the duty of every one, to promote, as far as in him lies, the happiness and welfare of his fellow creatures, and more especially, in an affair of

fuch importance as this is, where perhaps the life of a tender mother, and affectionate wife is at stake.

After having been fully instructed in the art of *midwifery* by the late ingenious Dr. *Smellie*, (to whom the world is so much indebted for many great improvements) I came into the country with full confidence and assurance of success from the opinion I *then*
had

had of my own abilities. I thought, as most young men vainly do, I was equal to any difficulty that might occur in practice. And a kind providence so far favoured me, that I met with the greatest success in many difficult and dangerous cases.

This, you must think, gave me great encouragement, and I began to think, I should never meet with much greater difficulty. But

alas ! I was soon convinced of my error, by several cases falling into my hands, which would have puzzled even men of the first eminence in the profession. In one of these, I was obliged to open the child's head, and extract it with the *Crotchet*, which, I have since been convinced might have been avoided, had I known then as much as I do now. I called in the assistance of another gentleman,

tlaman, who then lived in this place, but he, being more ignorant than myself, could afford me but little.

I mention this circumstance, gentlemen, in order to deter you from trusting too much to your own judgment and abilities in difficult and dangerous cases; and to shew you, how necessary it is to call in the assistance of old and experienced practitioners, which I should
gladly

gladly have done, if there had been any one near me. For the sake therefore, gentlemen, of your own reputation, as well as the safety and welfare of your patient, this should always be done. And you, by that means, will secure praise to yourselves, and honour to our profession.

This advice has been very properly and strongly recommended to us by Dr.

Pugh,

Pugh, some years ago; but has not, I fear been attended to, so much as it deserves.

Most authors, that I have consulted on this subject, are so very prolix in giving directions about delivery, that they load the memory without informing the understanding. And, in short, many of the directions they give, cannot be put in practice without great danger
both

both to the woman and child. Dr. *Smellies's*, for instance, in his chapter for using the *Forceps*, are, in my humble opinion, very dangerous in many cases, and apt to mislead young and unexperienced practitioners into many errors and difficulties. For although he very judiciously shortened the handles, and altered the curve of that instrument, in order, as he told us, to put it out of our
power

power to use it improperly, that is, when the head is not very low down in the *Pelvis* ; yet, at the same time, he throws a temptation in our way, to induce us to attempt to deliver with it, when the child is out of our reach. *Vid. Sect. 4. No. 2 and 4 of his Practice of midwifery.* For which reason this part of his treatise, ought never to be read, or, at least, attempted to be put in practice, but by persons

sons, who have judgment enough to select the good from the bad, and pick and chuse for themselves.

I shall now proceed briefly to shew you the method of practice, which I have used with such success for upwards of two and twenty years, that only three women have died in child-bed, out of near two thousand that I have delivered. One of which (a weakly woman)

woman) died immediately, after an easy and natural labour, from a flooding, occasioned, I believe, by the mismanagement of the women about her, who set her upright in a chair, contrary to my orders as soon as I left her, which I was obliged to do in haste, having been sent for to another patient. From this unfortunate event, I have ever since made it a rule not to suffer any of my women,
if

if I can possibly help it, to be taken up at all after delivery. If the woman is not already in bed, I order her to be moved upon another, which is provided for that purpose by the side of that she is delivered upon. By which means faintings and floodings are prevented, and she is put into her bed without fatigue or hazard.

C H A P. I.

Of Natural and Easy Labours.

WHEN you are called to a woman in labour, as soon as you arrive at the house, you will very often be met by one or more of the good women, who will come out in great haste, and tell you how glad they are to see
B you,

you, that Mrs. such an one is very bad indeed, and has had strong pains, that they verily believe, had you been there before, she might have been delivered. For, you must know, the women are always in a hurry at such times, and would induce you to be so too. But you must be aware of this; for nothing can be well done in a hurry. You may calmly reply, “ I am glad, ladies, to hear such
 “ good news, and I hope to find
 “ your information just, for the
 “ poor, woman’s sake, as well as
 “ my own,” adding, “ you will be
 “ pleased to tell her, that I am here
 “ ready to give her proper assist-
 “ ance.”

“ance.” For you must not go into the room abruptly, lest your sudden appearance should alarm and frighten her. When you come there, the first question necessary to be asked is, Are the waters broken? If they answer in the affirmative, you must, after listening attentively to a pain or two, place her upon her left side, and put a small pillow rolled up between her knees, and examine the state of the *Os Uteri*; the feel of which must be a guide to your future proceedings. If you find it largely open, and the head of the child advancing every pain, the labour most likely will go on

B 2

briskly,

briskly, and the business will be soon over. You will have nothing to do in this case, but to guard the *Perinaeum*, with the palm of your left hand, and receive the child, which, after the cutting and securing the navel string, you will give to one of the women. Then after waiting about ten minutes, you must extract the *Placenta*, in the manner which will be laid down by and by.

But if upon examining, you find the membranes are not broken, but are pushed down before the child's head, you must break them, lest the labour should be retarded

(5)

retarded by their toughness ; but
this must be done with caution,
and never with the *first* child,
nor if the child is not at hand,
seeing then, you may be sure, the
impediments arise from some
other cause.

B 3 CHAP. II.

C H A P. II.

Of tedious and lingering Labours.

WHEN you attend a woman in labour with her *first* child, which is commonly lingering, owing to the rigidity of the parts, you will have occasion to exercise all your patience. Here I must advise you never to examine till the membranes are broken, lest by so doing you should inadvertently break them too early in the labour; which will cause it to be
more

more lingering. But if, on the contrary, the waters have been discharged before you arrive, you must examine the state of the *Os Uteri*. If you find it but a little open, and not yielding to the touch, and the head very high up, so high that you cannot properly distinguish what part of the child presents itself, you must forbear giving any assistance for the present. You must not attempt to do any thing, till matters are in greater forwardness. And here let me caution you, young gentlemen, never to let the sufferings of the patient, nor the importunate solicitations of the women about

her, so far get the better of your judgment, as to tempt you to give untimely assistance. For if you do, you will most certainly be foiled, and do mischief. All you have to do in this case is, to amuse and gain time. When the head is farther advanced into the *Pelvis*, you may assist a little in gently dilating the *Os Internum*: which, when the head is low down, you must shove over it with two of your fingers under the *Os Pubis*. Then lubricate the parts well, and gently dilate the *Os Externum* during every pain, and by this means the delivery will be properly effected. But if the child
 should

should remain long in this situation, it may be lost by the great pressure upon the head. When this is the case, you must have recourse to the *Forceps*, especially, if you suspect your patient's strength is likely to fail.

CHAP. III.

C H A P. III.

Of the Forceps.

WHEN I recommend the use of this most noble instrument (to which thousands are indebted for their preservation) I must beg leave to be understood, to suppose the head to be so low down in the *Pelvis*, as to be nearly equal with the *Os Externum*. For in no other circumstance ought it ever to be applied; and in this case it never fails, but
is



is so safe and so easily managed, when in *judicious hands*, that it will not so much as leave the least mark upon the child's head; nor will the mother ever be sensible of its application, as I have happily experienced in many cases. But in the application of it, I must beg leave to lay before you a few rules and observations. Dr. *Smellie* tells us, that when the head of the child is in the situation above-mentioned, the forehead will commonly be found towards the *Os Sacrum*, and the *Occiput* towards the *Os Pubis*, and the ears to the sides of the *Pelvis* or a little diagonal. Vid. Authorem.

But

But he is certainly mistaken, for it is directly the reverse, the ears being generally found towards the *Os Pubis* and *Sacrum* until the head begins to give the half round turn over the *Pubis*. Therefore I have for many years always introduced the *Forceps* with one blade under the *Os Pubis*, and the other under the *Sacrum*, the patient being placed on her left side, in which direction it is much more easily fixed and will never fail to answer our purpose. On the other hand, if you introduce it into the sides of the *Pelvis*, one blade will go over the hind head, and the other will be to the Fontanel,

tanel, and by being at a great distance from each other, will gall and wound the child, and soon slip off; which will occasion much trouble to yourself and patient. When they are fixed in the manner I have recommended, move them gently from side to side, at the same time, turning the forehead into the hollow of the *Sacrum*, and the hind head from below the *Os Pubis*, then turn the woman upon her back, and standing up bring the head slowly over the *Os Pubis*; at the same time supporting the *Perinæum* with the palm of your left hand to guard it against laceration. To prevent

prevent which more effectually, I commonly take off the *Forceps* before I give the half round turn upwards, and assist gently with my hand, by which and the force of the labour pains the child will be safely delivered.

By using this method in tedious and lingering labours, and turning and bringing the child by the feet, in præternatural ones, we may always acquit ourselves with ease and safety to the patient, and with satisfaction to ourselves.

C H A P. IV.

Of the Crotchets.

IT will, no doubt, be expected, that I say something concerning the scissars and crotchet. But I shall only observe, that I think it is pity they were ever invented. For I am fully convinced that many lives have been destroyed by these most dangerous and frightful weapons. I myself was once an eye witness to the shocking scene of a child's coming crying
into

into the world, after the head had been perforated, which very probably might have been delivered by the common methods, if the *Accoucher* had not been in too great haste.

Whenever you are necessitated to make use of any instrument, you must carefully conceal it from the patient and by-standers. For the very name of an instrument, though ever so simple, carries terror along with it. I once put a room into great confusion and disorder by only taking out of my side pocket a red leather pouch, in which I carry my common
pocket

pocket instruments, to take out my scissars, which made a rattling noise. From this circumstance it was reported next day, that the woman had had a terrible labour, and that I was forced to deliver her with instruments.

C H A P. V.

Of Præternatural Labours.

WE call those *Præternatural Labours*, when any part, besides the crown of the head, presents itself. When you attend yourself from the beginning, or are there before the waters have been long discharged, you may easily turn and bring the child by the feet, and the sooner you do it, in these cases, the better. But when the waters have been long gone,

gone, and the *Uterus* is grown dry, you will find the utmost difficulty, and meet with such hard work, as will make your shirt stick to your back with sweat, even in the coldest day in winter. And the difficulty will always be in proportion to the distance the head is from the *Fundus Uteri*.

After having lubricated and dilated the *Vagina* and *Os Externum*; you must gently pass your hand, being first besmeared with hog's lard, up to the *Fundus Uteri*, and endeavour to lay hold of the feet, which you must bring down between your fingers: but

if, from the strong contraction of the womb, you cannot bring down both, you must bring one only as low down as you can, then pass a slip noose over the ankle, and while you pull at this, shove up the head and shoulders with the other hand, shoving up and pulling down alternately, till you get it round, and bring it along this way till you have brought the buttocks into the hollow of the *Pelvis*. Then bring out your hand, and assist with both externally, gently pulling and moving from side to side, till the body is delivered, remembering always to turn the belly of the child to the
back

back of the mother. As soon as you can reach the arms and shoulders, bring them down one after another, by turning the elbow into the hollow of the *Sacrum*, which will prevent their being broken. This being done, pass your fingers up, and introduce them into the child's mouth, resting the body of the child at the same time upon your left arm, and pull the chin to one side of the *Pelvis*, which is wider at the brim from side to side, than from the *Sacrum* to the *Os Pubis*, then turn it into the hollow of the *Sacrum*, and standing up, deliver with the half round turn up-

wards; but you must not do this too hastily, lest you lacerate the *Perinæum*, which, in this case, ought to be supported by an assistant, as both your own hands are fully employed. When the waters have been long gone (perhaps some days) and the womb is strongly contracted like a long sheath about the child, your hand will be so cramped that it will make you almost ready to cry out; and you will be obliged to rest several times before you can get it up to the *Fundus Uteri*; but you must not withdraw it until you have finished your business. For this would be giving
yourself

yourself much unnecessary trouble,
and your patient more pain.

I myself was once so fatigued in a case of this sort, that, after I had fixed a noose upon the ankle, by the help of Dr. *Pugh's* director, Plate 3, Letter B, and brought down the feet to the *Os Externum*, I was obliged to desist. For my strength was so much exhausted, that I could not shove the head and shoulders to the *Fundus Uteri*. Finding myself thus reduced to my *ne plus ultra*, I immediately sent for my old friend Mr. *Buck* from *Ipswich*, who, with great difficulty and

hard labour, finished the delivery in an hour.

However, if you should happen to find that the *Pelvis* is so distorted (as you possibly may) that you cannot bring the head into the hollow of the *Os Sacrum*, without danger of severing it from the body, you may then pass up one of the crotchets, and fix it firmly into the Fontanel; by the help of which internally, and your other hand over the neck and shoulders externally, you have a double purchase, and, I am certain, may deliver with more ease, than you could do by the
common

common methods laid down for using the crotchets. But I have never yet had occasion to try the experiment, and, I hope, never shall.

CHAP. VI.

C H A P. VI.

Of Twins.

TH E same method of delivery, must be observed here, as in other cases. If, after the first child is delivered, upon searching for the *Placenta*, you feel the membranes of another child, examine, during the interval of pains, (when the membranes will be flaccid) what part of it presents; if the head, and it comes low down, in a proper direction, the woman
is

is strong, and has not been much fatigued, wait half an hour, or more, to see if the pains return; if they do, most likely the child will soon be delivered in the natural way; but, if on the contrary, it presents wrong, pass your hand gently up to the *Fundus Uteri*, break the membranes, grasp the body of the child, turn the head up to the *Fundus Uteri*, and the breach to the upper part of the *Pelvis*; then bringing down your hand, take hold of the legs, and extract as in page 19.

C H A P. VII.

Of Floodings.

WHENEVER these happen, it is the most dangerous case we can meet with in the practice of midwifery, and no time must be lost. For unless the woman is speedily delivered, she must die. Do not therefore wait for pains, for if you do, you will be deceived; for there can be no pains where there is no strength. This therefore is a case that will try your courage, and exercise your genius; yet you must never

never abandon your patient, nor refuse to deliver. For could you be quite certain, that the woman would die under your hands, yet it is your duty to deliver in hopes of saving the child.

This brings to my remembrance a remarkable case (I relate it with pleasure) that I was concerned in some years ago. I was sent for, in the middle of the night, to one Mrs. *Elliot*, a substantial farmer's wife, who lived at *Little Oakley Hall*, about four miles distant from *Harwich*. Being at that time of day young and active, I was up and with her in about
half

half an hour. When I came there, I found the house in the greatest confusion, the women crying and lamenting, and her husband almost distracted. They told me, I was come too late, that Mrs. *Elliot* was just gone off in a fit, and, at the same time, very justly exclaimed against the woman-midwife for keeping her in hand so long. I felt her hands, which were cold, and I could perceive no pulsation either at the wrist, or the temples. But upon feeling her body, which was warm, I thought I perceived the motion of the child and some signs of life in the mother; which

I communicated to her friends and attendants, and begged leave to attempt to deliver her, in hopes, at least, of saving the child's life. Having obtained it, after placing her upon her back with proper assistants to support her and keep her steady, I examined and found the head of the child jammed very low down into the *Pelvis*, and soon delivered it with the *Forceps*; but it was dead. After separating the navel string, I gave it to one of the women; then introducing two of my fingers into the *Vagina* in order to bring away the *Placenta*, I found the membranes of another child presenting.

fenting. I immediately pushed
 up my hand to the *Fundus Uteri*,
 broke the membranes, turned the
 child, and easily delivered her of
 another fine, strong, lively girl,
 and after that of a double *Pla-*
centa. In all this time, which I
 believe was about half an hour,
 the mother did not discover the
 least signs of life, but lay in a state
 of insensibility many hours after,
 and does not, to this day, remem-
 ber the least circumstance about
 her delivery. However she re-
 covered much faster than could
 have been expected, and I have
 delivered her of several children
 (I believe seven or eight) since, I
 have

have related this case in order to encourage you never to give up a patient, till you are sure she is quite dead. My success in this case gained me great reputation, and much practice.

D CHAP. VIII.

C H A P. VIII.

Of Extracting the Placenta.

ABOUT ten minutes after the child is delivered, you must introduce your two fingers into the *Vagina*, by the direction of the navel string, and feel for the *Placenta*, which, if it be low down, and lying loose, you will easily bring away. But if it still remains high up, and sticks at the *Fundus Uteri*, you must desire one of the assisting women to
rub

rub and press her *Abdomen* gently; and, at the same time, order the woman to blow her nose and cough. By this means it will, in most cases, be brought away. But should a Flooding come on, you must pass up your hand gently to the *Fundus Uteri*, and, after carefully separating it from the womb, bring it away. This, however, you will seldom have occasion to do, nor ought it ever to be done, but when it is absolutely necessary.

CON-

CONCLUSION.

I Would now just put you in mind, that an *Accoucher* should not only have the advantage of a thorough education in his profession, but also be endued with a natural sagacity, resolution and prudence, and especially, with that humanity which adorns the possessor, and never fails of being well pleasing to the distressed patient. This virtue will incite him to assist the poor as well as the rich, and to behave always with tenderness and compassion. He ought also,
at

at all times, to act and speak with the utmost delicacy and decorum, and never betray the trust reposed in him, by harbouring the least indecent design, but conduct himself in all respects, suitable to the character of an honest man and a gentleman. His Motto should be, "*Testor Deum, Me, quaecunque inter curandum videro audiverove; si quidem efferri non expediat, silentio suppressurum.*"

And now, gentlemen, before I take my leave of you, I must recommend to you in the strongest terms, to live in friendship and harmony one with another, and
to

to be always ready to assist each other in cases of difficulty. This will be of great advantage to yourselves, and to your patients. And if at any time, an accident should happen, you will have at least an inward satisfaction, that every thing that could be done, was done to prevent it.

You well know we are much exposed to censure, and have many enemies to encounter with, who are always ready to take every advantage of us. How necessary then is it, that we should be always upon our guard. And if, at any time, the loud voice of
calumny

calumny should go forth against you, you will always find it best to take no notice of it; if you bear it with calmness and temper, the clamour will soon cease. For when that wasp hath discharged its venom, and lost its sting, it will dwindle and waste away to nothing. But if you resist and threaten, it will revive again with fresh vigour, and probably never die.

F I N I S.

E R R A T A.

Page 7, line 7, for *Head*, read *Child*: line 9 and 10, for *the Child*, read *it*: page 26, line ult. before *the Woman*, insert *and*: page 27, line 12, for *Breach*, read *Breech*.

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